Fill in this information to	o identify your case:	
Debtor 1	James N. Shaulis	
Debtor 2 (Spouse, if filing)		
United States Bankrupt	ccy Court for the: EASTERN DISTRICT OF PENNSYLVANIA	
	11262	Check if this is:
(If known)		An amended filing
		☐ A supplement showing postpetition chapter 13 income as of the following date:
Official Form	1061	MM / DD/ YYYY
Oak adada la V		, 22,

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse			
If you have more than one job,	Empleyment status	■ Employed	■ Employed			
attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed Home Health care			
employers.	Occupation	Truck Driver				
Include part-time, seasonal, or self-employed work.	Employer's name	First Fleet	Homestead Sr. Care			
Occupation may include student or homemaker, if it applies.	Employer's address	202 Heritage Park Drive Murfreesboro, TN 37129	7 N. 5 Points Road West Chester, PA 19382			
	How long employed the	here? 6 years	12 years			

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 2 or For Debtor 1 non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 3,440.00 1,600.00 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 3. 0.00 0.00 Calculate gross Income. Add line 2 + line 3. 3,440.00 1,600.00

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Debt	or 1	James N. Shaulis	-	(Case i	number (<i>if k</i>	nown)	_1	9-11262		
					For Debtor 1				For Debto		
	Cor	by line 4 here	4.		\$	3,440	2 00		non-filing	spouse 1,600.00	
	-				Ψ_	0,44		-	Ψ	1,000.00	<u> </u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a		\$		0.00	-	\$	500.00	
	5b.	Mandatory contributions for retirement plans	5b		\$		0.00	-	\$	0.00	_
	5c.	Voluntary contributions for retirement plans	5c		\$_		0.00	-	\$	0.00	
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d 5e		\$ \$		0.00	-	\$	0.00	
	5f.	Domestic support obligations	5f.		\$ —		0.00 0.00	-	\$	0.00	
	5g.	Union dues	5g		\$		0.00	_	\$	0.00	
	5h.	Other deductions. Specify:).+	\$		0.00	_	\$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.		\$	640	0.00		\$	500.00	 D
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,80		-	\$	1,100.00	_
8.		all other income regularly received:			· —	_,-,		-	·		<u>-</u> -
0.	8a.	Net income from rental property and from operating a business, profession, or farm									
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	8a		\$		0.00	_	\$	0.00	
	8b.	Interest and dividends	8b).	\$	(0.00	-	\$	0.00	0_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce									
		settlement, and property settlement.	8c	:.	\$		0.00		\$	0.00	0
	8d.	Unemployment compensation	8d	١.	\$		0.00	-	\$	0.0	
	8e.	Social Security	8e) .	\$	1,58 ⁻	1.00		\$	1,102.00	0
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.									
		Specify:	8f.		\$		0.00	_	\$	0.00	_
	8g.	Pension or retirement income Other monthly income. Specify:	8g	J. 1.+	\$ \$		0.00	-	\$	0.00	
8h.	OII.	Other monthly income. Specify.	_ 011	ı. +	Φ_		0.00	+	Ф	0.00	<u>u</u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	;	\$	1,58	1.00		\$	1,102.0	00
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		4,381.00	+ \$		2,202.00) = \$	6,583.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				.,					0,000.00
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not ecify:	depe			•			I in <i>Schedu</i>	ıle J. . +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the Summary of Schedules and Statistical Summary of Certain								. \$	6,583.00
13.	Do '	you expect an increase or decrease within the year after you file this form	?							Comb	ined nly income
		No.									
		Yes Explain:									

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